GISTRATION#		Existing System TION New Installation		
IF A LOCATION HAS MORE THAN ONE ALARM	N SYSTEM, SEPARATE REC	SISTRATIONS AN	D FEES ARE REQUIRED.	
Miami-Dade County Ordinance Section 21-276 requires any alarm which Miami-Dade County provides primary police protection, to file				
PRINT LEGIBLY				
RESIDENTIAL USER:				
Residential Name (Last) (Fi	rst)	DOB:	Phone #	
Address		Apt. or Suite	Zip	
Mailing Address		Apt. or Suite	Zip	
BUSINESS USER:		L	<u> </u>	
Business Name	Location#		Phone#	
Address		Apt. or Suite	Zip	
Mailing Address		Apt. or Suite	Zip	
Type of Premises: Res. Bus. Governmental Non Profit Org./Church School (Public Private) INDIVIDUAL ABLE AND AUTHORIZED TO ENTER PREMISES AND DEACTIVATE THE ALARM				
ast Name First Name			Phone#	
ALARM COMPANY MONITORING THE ALARM SY	STEM			
Name	State Lic.#		Phone#	
ALARM COMPANY CURRENTLY SERVICING SYSTEM OR THE ORIGINAL INSTALLER				
Name	State Lic.#		Phone#	

Upon receipt of registration card, Miami-Dade Police will issue a confirmation card and registration number by mail. A copy of the installer's current state license must be on file with the False Alarm Enforcement Unit in order to process the registration. All inquiries should be directed to the False Alarm Enforcement Unit at (305) 596-8899. See reverse side for locations where additional Registration Forms are available.